

ETHICS ORDINANCE
DISCLOSURE FORM

NAME: ALAN D. SESSLER

ADDRESS: 211 2ND ST. NW APT. 2007

CITY, STATE, ZIP CODE ROCHESTER, MN 55901

1. What is the name of your position, title or job title?

RETIRED

2. Is this an employed, appointed, or elected position?

NO

3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?

PUBLIC LIBRARY BOARD + FOUNDATION

4. When were you hired, appointed or elected to this position?

2009

For questions 5, 6 and 7, the word "interest" means a substantial financial interest through your ownership of stocks, bonds, notes or other securities. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

5. Please list your interests in real property within the City of Rochester, other than your homestead. Complete on a separate page if necessary.

VACANT LOT + TOWNHOUSE

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6. Please list any interests you have in a business doing business with the City.

NONE

7. Please list any interest you have in any business located within, or doing business in, the City.

NONE

8. List any and all employment.

MAYO CLINIC

FOUNDATION FOR ANESTHESIA EDUC. + RES.

I hereby certify that the above information is complete and accurate.

Alan B. Sessler

Signature

7.20.11

Date

Please mail completed and signed form to:
Judy Scherr, CMC, City Clerk, City Hall, 201 4th Street SE, Room 135
Rochester, MN 55904-3742